



The Gateway to Lake Tillery

CODE ENFORCEMENT COMPLAINT FORM

Date: _____ Time: _____ Received by: _____ Case #: _____

Complainant's Name: _____ Phone #: _____

Complainant's Address: _____

Complainant's Signature: _____

Address of Alleged Violation(s): _____

Tax Record: _____ PIN: _____

Property Owner(s): _____

Tenant(s): _____

Details of Complaint: _____

Date/Time of Initial Investigation:

Action Taken: _____ Verbal: _____ Written: _____

Date(s) of Follow-up Visits: _____

Details: _____

Final Disposition Date: _____ Completed By: _____

Details of Work Done to Comply:
